

**TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)**  
**(37 C.F.R. 1.311)**

Docket No.  
**C-504 / TEC1212-01**

Applicant(s): **Robin G. Skinner**

Application No. <b>10/657,382</b>	Filing Date <b>09/08/2003</b>	Examiner <b>Michael Koczko, Jr.</b>	Customer No. <b>00832</b>	Group Art Unit <b>3746</b>	Confirmation No. <b>9380</b>
--------------------------------------	----------------------------------	--	------------------------------	-------------------------------	---------------------------------

Invention:

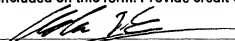
**COMPRESSOR MOUNTING BRACKET AND METHOD OF MAKING**

**Mail Stop Issue Fee**  
**COMMISSIONER FOR PATENTS**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1400.00      ☐ Design Fee: \_\_\_\_\_      ☐ Plant Fee: \_\_\_\_\_
- ☒ Publication Fee: \$ 300.00
- ☐ A check in the amount of \_\_\_\_\_ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **02-0385** as described below.
- ☒ Charge the amount of **\$1,700.00**
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

  
\_\_\_\_\_  
Signature

Dated: January 31, 2007


**Adam F. Cox, Regis. No. 46,644**  
**BAKER & DANIELS**  
**111 East Wayne Street, Suite 800**  
**Fort Wayne, IN 46802**

**TX: (260) 424-8000**  
**FAX: (260) 460-1700**

CC:

Electronically

**Certificate of Transmission**  
This certificate may only be used if paying  
by deposit account.

I certify that this document and authorization to charge deposit account is being transmitted to the United States and Trademark Office electronically on
<u>January 31, 2007</u> (Date)
 _____ Signature
<b>Adam F. Cox</b> Typed or Printed Name of Person Signing Certificate

**Certificate of Mailing by First Class Mail**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on
_____ (Date)
_____ Signature of Person Mailing Correspondence
_____ Typed or Printed Name of Person Mailing Correspondence